

AFFIDAVIT

I.....age.....years,,
D/S/oFather'sName.....
.....Mother's Name.....Solemnly affirm on this
date.....as under.

1. That I have received a copy of rules and regulations of Saraswati Medical College, Unnao, UP and have carefully read and fully understand the provisions contained in the said regulation. I hereby promise to abide by all rules and regulations laid down by the college.

Contd..

(2)

2. I hereby also solemnly affirm and undertake that;
 - a. I will not indulge in any behavior or act that may constitute as ragging or indulge in any unlawful activity or activities, or get indulge into self inflicting bodily harm or any other anti social or equivalent activity constituting of same nature or category.
 - b. I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging or conspire to promote ragging.
 - c. I fully understand and completely agree that as per the Hon'ble Supreme Court's judgment/directions, I am liable for expulsion and other consequence from the college on being found in breach of any of my undertaking or found guilty in any case in reference to clause 2 (a) of this affidavit.
3. That I submit and affirm that I have received full information regarding the prescribed annual tuition fee for the MBBS course which is 11,59,610 (Eleven Lakh Fifty Nine Thousand Six Hundred and 10 Only) and course fee is 52,18,245 (Fifty Two Lakh and Eighteen Thousand Two Hundred and Fourty Five Only) vide File No.:71-4099/34/2021 of DGME/Govt. of UP. The duration of the MBBS course is 4^{1/2}(Four an Half Years) years.
4. That I undertake that I shall always pay the entire course fee (prescribed fee) of MBBS course on time. Failing to pay, I understand and completely agree that suitable fine will be imposed and shall have to be paid by me. I undertake that if I fail to pay my course fee in accordance with the Clause 3 of this affidavit I will be ready to face expulsion from the college and shall not be allowed to sit in the internal/university examination by the college.
5. That I understand fully and agree completely that course fee which is to be paid under clause 3 of this affidavit is a non refundable and which shall not be refunded for any reason whatsoever once paid to the college against the admission in the MBBS course.
6. That I understand fully and agree completely that if I discontinue or leave the course in middle of the duration of the course, for any reason, what so ever, I shall pay the entire course fee for all the rest of the period of the course and therefore undertake to indemnify the college from any financial losses occurring on account of my discontinuation or leaving the course in between.
7. That I agree to pay any enhanced fee in future if ordered by the Government/Fee Committee/Hon'ble High Court/Hon'ble Supreme Court/College or University/ or by any Statutory Authority and shall raise no objection or disagreement in this regard.
8. That I solemnly declare that all the particulars mention in the admission form are TRUE and correct, I fully understand that if any of the statement made in the application is found to be incorrect or any document produced with this form is FALSE or FAKE, I would be liable to refusal for admission to the medical college, if otherwise eligible for admission and be admitted, would be liable to be expelled from the college any time during the course of my studies. In this case all the fee paid and other dues by me to the college/institute shall be forfeited and other departmental or legal action which the college may deem fit may be taken.
9. That I also agree that the sole responsibility of getting the enrollment done in University. I understand and agree that the college will not be held responsible in case of my enrollment
10. That I fully understand and completely agree that I will not hold the college authority or authorities responsible for myself inflicting bodily harm, unlawful activity or any anti social activity, and undertake that so long as I am student of the institute, I will do nothing inside or outside the college, hostel and hospital premises that may interfere with its orderly administration and discipline or may bring the institute or its administration in disrepute.

(3)

11. That I am informed and completely agree that the security deposit as required by the college shall be deposited by me which will be forfeited in case I discontinue or leave course in the middle of the duration of the MBBS course for any reason what so ever. Security fee shall also get forfeited in case I am found in any activity related to self inflicting bodily harm or unlawful anti social involvement of any nature. I authorize the college to deduct any fines, damages, pending fees, or any other dues from my security deposit.
12. That my Permanent/Current Address/Communication Address, email ID and phone nos. where I would expect the college authorities to contact us in case of any urgent, serious matter or else otherwise all so is as mention below.

Permanent Address

.....

Current

Address.....

.....

Email ID.....Phone No.....

I also submit that I will inform the college authorities about any change in the address/phone nos. within 48 hours of any such change.

13. That I fully understand and completely agree that as per the University norms 75% attendance is mandatory for practical and 75% attendance is required for theory classes for any student to be eligible to appear in University Professional Examinations. Any student failing to confirm to this eligibility criterion will not be allowed to appear in the university exam and parents will desist from pressing the college authorities to complete the attendance unlawful.

Place :.....

Date :.....

(Signature of Deponent)

Declaration

I solemnly affirm that I have read the document carefully and the information given by me is true and to the best of my knowledge. I also submit that I shall actively interact with the college authorities/teaching staff to ask about the progress of my ward.

Witness

1. Signature of Parents/Guardian.....

Name.....

Address.....

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Mobile No.....

2. Signature of Parents/Guardian.....

Name.....

Address.....

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Mobile No.....